## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant:

Mitsuo NARITA et al.

Title:

ZINC CHLORIDE-LOADED SUPPORT AND METHOD FOR

PRODUCING THE SAME

Appl. No.:

Unknown

Filing Date:

11/18/03

Examiner:

Unknown

Art Unit:

Unknown

## **UTILITY PATENT APPLICATION TRANSMITTAL**

Mail Stop PATENT APPLICATION Commissioner for Patents PO Box 1450 Alexandria, Virginia 22313-1450

Sir:

Transmitted herewith for filing under 37 C.F.R. § 1.53(b) is the nonprovisional utility patent application of:

> Mitsuo Narita c/o Specialty Chemicals Research Center Shin-Etsu Chemical Co., Ltd. 28-1, Nishi-Fukushima, Kubiki-mura Naka Kubiki-gun, Niigata-ken Japan

Masaki Tabata c/o Specialty Chemicals Research Center Shin-Etsu Chemical Co., Ltd. 28-1, Nishi-Fukushima, Kubiki-mura Naka Kubiki-gun, Niigata-Ken Japan

Kazuhisa Hayakawa c/o Specialty Chemicals Research Center Shin-Etsu Chemical Co., Ltd. 28-1, Nishi-Fukushima, Kubiki-mura Naka Kubiki-gun, Niigata-ken Japan

## Enclosed are:

- [X] Specification, Claim(s), and Abstract (20 pages).
- [X] Declaration and Power of Attorney (2 pages).
- [X] Assignment of the invention to Shin-Etsu Chemical Co., Ltd..
- [X] Assignment Recordation Cover Sheet.
- [X] Check in the amount of \$40.00 for Assignment recordation.
- [X] Information Disclosure Statement.
- [X] Form SB/08 with copies of 1 listed reference(s).
- [X] Application Data Sheet (37 CFR 1.76).
- [X] Claim for Convention Priority.

## The filing fee is calculated below:

<del>-</del>	Claims		Included		Extra		Rate		Fee
	as Filed		in		Claims				Totals
			Basic Fee						
Basic Fee							\$770.00	=	\$770.00
Total	12	-	20	=	0	X	\$18.00	=	\$0.00
Claims:									
Independents	1	-	3	=	0	X	\$86.00	=	\$0.00
:									
If any Multiple	e Dependen	t C	laim(s) prese	ent:		+	\$290.00	=	\$0.00
							SUBTOTAL:	=	\$770.00
[ ]		Sı	mall Entity F	ees	Apply (	subtr	act ½ of above):	=	\$0.00
- <b>-</b>					Γ	OTA	L FILING FEE:	=	\$770.00

<sup>[</sup>X] A check in the amount of \$770.00 to cover the filing fee is enclosed.

[X] The Commissioner is hereby authorized to charge any additional fees which may be required regarding this application under 37 C.F.R. §§ 1.16-1.17, or credit any overpayment, to Deposit Account No. 19-0741. Should no proper payment be enclosed herewith, as by a check being in the wrong amount, unsigned, post-dated, otherwise improper or informal or even entirely missing, the Commissioner is authorized to charge the unpaid amount to Deposit Account No. 19-0741.

Please direct all correspondence to the undersigned attorney or agent at the address indicated below.

Respectfully submitted,

Date Nov. 18, 2003

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